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CENTRAL FAX CENTER**APR 12 2005****FACSIMILE COVER SHEET**Deliver to: Unknown, USPTOArt Group: 2183Facsimile No.: 703.746.9195Date: April 12, 2005From: Mark C. Van Ness, Reg. No. 39,865Our Docket No.: 42390P12878Number of pages 4 including this sheet.Application No.: 10/057163Filing Date: 1/24/2002

Docket Due Date(s): _____

Enclosed are the following documents:

- | | |
|--|---|
| <input type="checkbox"/> Amendment: _____ (____ pgs) | <input type="checkbox"/> Issue Fee Transmittal |
| <input type="checkbox"/> Appeal Brief (____ pgs) | <input type="checkbox"/> Notice of Appeal |
| <input type="checkbox"/> Application: _____
(____ pgs) w/cover & abstract | <input type="checkbox"/> Petition for: _____ |
| <input type="checkbox"/> Assignment & Cover Sheet (____ pgs) | <input type="checkbox"/> Request for Continued Examination (RCE) |
| <input type="checkbox"/> Certificate of _____ | <input type="checkbox"/> Reply Brief (____ pgs) |
| <input type="checkbox"/> Continued Prosecution Application (CPA) | <input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i) |
| <input type="checkbox"/> Declaration & POA (____ pgs) | <input type="checkbox"/> Request to Rescind Previous Nonpublication Request |
| <input type="checkbox"/> Drawings: ____ sheets, ____ figures | <input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter |
| <input type="checkbox"/> Extension of Time: _____ | <input type="checkbox"/> Response to Written Opinion (____ pgs) |
| <input type="checkbox"/> Fee Transmittal (in duplicate) | <input type="checkbox"/> Terminal Disclaimer |
| <input type="checkbox"/> IDS & PTO/SB/08 (____ pgs) | <input type="checkbox"/> Transmittal of Publication Fee Due |
| <input checked="" type="checkbox"/> Other Request for corrected filing receipt | <input type="checkbox"/> Transmittal Letter |
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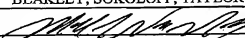

Gayle Bekish4/12/2005
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application No.	10/057163	
	Filing Date	January 24, 2002	
	First Named Inventor	Scott H. Robinson	
	Art Unit	2183	
	Examiner Name	Unknown	
Total Number of Pages in This Submission	2	Attorney Docket Number	42390P12878

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> Request for corrected filing receipt Copy of the updated filing receipt Return Postcard </div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Mark C. Van Ness, Reg. No. 39,865 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	April 12, 2005

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Typed or printed name	Gayle Bekish	Date	April 12, 2005
Signature		Date	April 12, 2005

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/06/04/2004.
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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REQUEST FOR CORRECTED FILING RECEIPT		Docket Number 42390P12878					
		In re Application of Scott H. Robinson, et al.					
		Application Number 10/057163	Filed 1/24/2002				
		For CONTEXT-BASED INFORMATION PROCESSING					
		Group Art Unit 2183	Examiner Unknown				
<p>1. Attached is a copy of the Updated Filing Receipt received from the PTO in the above application for which issuance of a corrected Updated Filing Receipt is respectfully requested.</p> <p>2. There is an error with respect to the following data, which is:</p> <p><input checked="" type="checkbox"/> Incorrectly entered and/or <input type="checkbox"/> omitted.</p> <table border="0"><thead><tr><th>Error In</th><th>Correct Data</th></tr></thead><tbody><tr><td>Applicant's Name Scott L. Robinson</td><td>Scott H. Robinson</td></tr></tbody></table> <p>Respectfully submitted, BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP</p> <p>Dated: April 12, 2005</p> <p>Mark C. Van Ness, Reg. No. 39,865</p> <p>CERTIFICATE OF MAILING/TRANSMISSION I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.</p> <p>Gayle Bekish</p> <p>04/12/05 Date</p>				Error In	Correct Data	Applicant's Name Scott L. Robinson	Scott H. Robinson
Error In	Correct Data						
Applicant's Name Scott L. Robinson	Scott H. Robinson						

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APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/057,163	01/24/2002	2183	1068	42390.P12878	6	31	3

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CONFIRMATION NO. 1704

UPDATED FILING RECEIPT

FOR THE PATENT AND TRADEMARK OFFICE
 "0C000090014720458"

Date Mailed: 12/10/2004

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

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Power of Attorney: The patent practitioners associated with Customer Number 008791

Domestic Priority data as claimed by applicant

Foreign Applications

If Required, Foreign Filing License Granted: 02/19/2002

The country code and number of your priority application, to be used for filing abroad under the Paris Convention, is **US10/057,163**

Projected Publication Date: 03/17/2005

